

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000149976 3)))



H220001499763ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : ZMB TAX SOLUTIONS

Account Number : I20200000182

Phone : (407)485-0927 Fax Number : (407)777-9222

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		

COR AMND/RESTATE/CORRECT OR O/D RESIGN RESEMARY AND GRACE INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

APR 27 2022

Electronic Filing Menu Corporate Filing Menu

Help

H220001499763

COVER LETTER

TO: Amendment Section Division of Corporati	ons				
NAME OF CORPORAT	ION:RESEMARY A	ND GRACE INC			
DOCUMENT NUMBER	:P22000025541	P22000025541			
The enclosed Articles of A	mendment and fee are su	bmitted for filing.			
Please return all correspon	dence concerning this ma	tter to the following:			
Me	Mercedes Bazaante				
		Name of Contact Person			
	Firm/ Company				
536	6 CENTRAL FLORIDA	PKWY#7			
		Address			
Orl:	ando, FL 32821				
		City/ State and Zip Code	•		
2ml	otaxsolutions@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information co	neerning this matter, pleas	se call:			
Mercedes Bazante		at (<u>407</u>	485-0927		
Name of C	ontact Porson	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address		Street .	Address		
	nent Section		ment Section		
	of Corporations	Division of Corporations			
P.O. Bo Tallahas	x 6327 see, FL 32314	The Centre of Tallahassee			
i attatias	366, 1 - 34314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

H22000 149976 3

	Articles of Ame	endment			
	Articles of Incor	poration			~
	of			38	2022
	RESEMAR	Y AND GRACE INC		52	· 景
(Name of Corp.	oration as currently i	iled with the Florida Dept	, of State)	75	
	P220000255	41		38.5	26
		Corporation (if known)		770	P
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this Fi	orida Profit Corporation w	lopts the following	ig kin en d	ime t i
A. If amending name, enter the new name of t	the corporation:				
ROSEMARY AND GRACE INC				The)	new
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	"Inc," or "Co". A j	mpany," or "Incorporated" professional corporation n	or the abbreviati ame must conta	on "Corq in the w	p.," ord
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET			······································		
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFIC	E BOX)				
D. If amending the registered agent and/or re new registered agent and/or the new regist		ss in Florida, enter the na	ne of the		
Name of New Registered Agent				_	
	(Florida stree	l address)		-	
New Registered Office Address:			, Florida		
	(C	ity)	(7.ip	Code)	_
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag	g Registered Agent: ent. I am familiar wii	th and accept the obligation	s of the position.		
	Signature of New Reg	istered Agent, if changing		_	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

Example:

H220001499763

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

 $P \rightarrow President; V \Rightarrow Vice President; T \Rightarrow Treasurer; S \Rightarrow Secretary; D \Rightarrow Director; TR \Rightarrow Trustee; C \Rightarrow Chairman or Clerk; CEO \Rightarrow Chief Executive Officer; CFO \Rightarrow Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

Changes should be noted in the following manner. Currently John Doc is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Nume	Address
1) Change			
Add			
Remove			
2) Change			
Add			<u></u>
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			·
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

H220001499763

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
······	
If an amandment avoides for an ovel	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

H220001499763

The date of each amendment(s) adopted this document was signed.	tion:		, if other than the
date tille document was algitett.			
Effective date if applicable:	(no more than 90 days af	ter amendment file d	latu)
Note: If the date inserted in this block document's effective date on the Depar		utory filing requirer	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
■ The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of	directors without sha	archolder action and shareholder
The amendment(s) was/were adopte by the shareholders was/were suffice		of votes cast for the	amendment(s)
☐ The amendment(s) was/were approvement be separately provided for each			
"The number of votes east for	the amendment(s) was/were suffic	ent for approval	
by			
	(voting group)		
Dated 4/26	12022		
Signature	Yanilka Sal	.a.S	
(By a direc selected, b	tor, president or other officer – if d y an incorporator – if in the hands of fiduciary by that fiduciary)		
	(Typed or printed name of	alaS person signing)	
	(Title of person signing)	<u>alas</u>	President